SUB-CONTRACTOR RECIPROCAL BUSINESS LICENSE APPLICATION



SIGNATURE OF APPLICANT/QUALIFIER

Sandy City Business License Sandy City Community Development Department 10000 Centennial Parkway, Sandy, UT 84070 TEL# (801) 568-7252 FAX# (801) 568-7278

F	or staff use only		
Date Received:	Account Number:		
	1		
New License Request	Update to Existing Contractor's Reciprocal License		
Business Information			
Business Name (DBA):			
Address of Establishment:			
City, State, ZIP:	D : 5 N I		
Business Phone Number:	Business Fax Number:		
Commercial or Home:	<u> </u>		
If a Home, Rent or Own:	If rent, permission letter:	Yes	No
Type of Construction:			
Commencement / Starting Date:			
State/DOPL License Number:	Copy of DOPL License:	Yes	No
Mailing Address (if different):			
Mailing City, State, ZIP:			
Web Address:	Business Email Address:		
Applicant Information			
Full Name (F,M,L)			
Home Address			
City, State, ZIP			
Date of Birth			
Are you a qualifier on the State License? Y / N	Home Phone Number:		
Fees are calculated from August 1 through July 31 of each year:			
\$90.00 Annual Fee:	Prorate @% = \$		
Discount Annual Fee with Commercial License-\$65.00 Annual Fe			
\$11.00 per Empl: # x \$11 = \$	Prorate @% = \$		
	TOTAL AMOUNT DUE \$		
Please Note: 1. If the State Contractor License is revoked or lapses, the Sandy City 2. A \$25 charge will be made on all checks returned by the bank. 3. If this business is located in a commercial location, a Commercial 4. Signing this application affirms that all information supplied is true a ordinances and all other applicable State and Federal Statutes government.	Business license is also required. and correct and that any and all busine	Ū	omply with Sandy City

DATE